$\underset{\text{B6 Summary (Official Form 6-Summary)}}{\text{Case 13-30703}}\underset{\text{Doc 10}}{\text{Doc 10}}$ 

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# **United States Bankruptcy Court** District of Utah

District of C	Jta
	District of C

Case	No.	13-30703

VanDehei, Jason William

IN RE:

Chapter 7

Debtor(s)

#### AMENDED SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 1,264.14		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		\$ 178,589.97	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 950.36
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 947.08
	TOTAL	18	\$ 1,264.14	\$ 178,589.97	

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IN RE:		Case No. <u>13-30703</u>
VanDehei, Jason William		Chapter 7
	Debtor(s)	•

## AMENDED STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 26,301.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 26,301.00

#### State the following:

Average Income (from Schedule I, Line 12)	\$ 950.36
Average Expenses (from Schedule J, Line 22)	\$ 947.08
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20)	\$ 2,242.76

#### **State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 178,589.97
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 178,589.97

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the Summary of Schedules and, if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

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IN RE VanDehei, Jason William

Debtor(s)

Case No. 13-30703

(If known)

## AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED CONTINGENT CODEBTOR DISPUTED CREDITOR'S NAME, MAILING ADDRESS AMOUNT DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CONSIDERATION FOR CLAIM. IF CLAIM IS (See Instructions Above.) SUBJECT TO SETOFF, SO STATE CLAIM ACCOUNT NO. Unknown unknown date CheckMate 1290 South 300 West Salt Lake City, UT 84101 994.87 Assignee or other notification for: ACCOUNT NO. CheckMate American Recovery Group 251 Mountainview Ave., Ste. 2E Nyack, NY 10960 ACCOUNT NO. ACCOUNT NO. Subtotal 994.87 continuation sheets attached (Total of this page) Total (Use only on last page of the completed Schedule F. Report also on